

Fee Calculation Sheet
 (FOR USE WITH FORM PTO-875)

09/037767

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1		1				
2		1		1			
3	1		1				
4	1		1				
5	2		1				
6	1		1				
7	1		1				
8	1		1				
9	1		1				
10	1		1				
11	1		1				
12	1		1				
13	1		1				
14	B		1				
15			1				
16	1		1				
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50							
TOTAL IND.			1				
TOTAL DEP.			21				
TOTAL CLAIMS			22				

	*		*		*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
51							
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99							
100							
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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